EDITORIAL COMMENT*

CONFUSION OF PARTIAL HEART-BLOCK WITH EXTRASYSTOLES

Premature ventricular contractions, so-called extrasystoles, are frequently of little significance as to prognosis or treatment, particularly when they occur in young individuals. Heart-block of any degree, however, and at any age, is more significant, and indicates a definite myocardial lesion except in those cases of short duration due to toxemia or similar noxious influences. The former very frequently, if not in most cases, requires no treatment and may even be neglected without any resultant harm; the latter demands caution in prognosis and treatment always, not necessarily medical, however, as rest in bed may be sufficient in a mild case, especially when of a toxic nature.

There are many individuals, usually in or about the second decade of life, who present the appearance and history of what commonly passes under the name of neurocirculatory asthenia, or more colloquially "nervous heart" or "irritable heart." They very frequently show extrasystoles on auscultation, or what seem to be extrasystoles. These extra beats are diagnosed according to the general appearance of the case, and dismissed with a prescription for bromides or I. Q. and S.

Lutembacher, in a recent number of *La Presse Médicale,*[1] cites a case of this nature in which the electrocardiogram showed the apparent extrasystoles to be really due to a two to one heart-block. To quote him: "It concerns a young girl of thirty years. She complained of sudden attacks of malaise and dizziness. The blood pressure was normal; an irregularity in cardiac rhythm was considered to be extrasystoles due to reflex phenomena of digestive origin. For many months the patient submitted to the most varied regimens and took many medicines, without result.

"As the cardiac disturbance progressed, digitalis was proposed. However, with the prolonged administration of this medicine, grave symptoms appeared suddenly, such as attacks of syncope with epileptiform accompaniment. The cardiac rate was considerably decreased. These attacks continued for more than eight days, when they began to decrease in proportion to the elimination of the digitalis from the body.

"In spite of this warning, nothing was done to determine the precise nature of the arrhythmia. Months passed. The patient experienced a syncopal attack in the street. . . . Then an electrocardiogram was taken. It revealed an incomplete block, and explained all the phenomena observed, the malaise, the dizziness and the sudden aggravation of the trouble under the influence of digitalis. . . .

"In this case there was no sign of cardiac insufficiency authorizing the use of digitalis; the heart was not enlarged and there was neither dyspnea nor signs of stasis."

The history of this case revealed nothing in the patient's past or family that would give a clue to the etiology, but as the patient had had three miscarriages mercury was administered, in spite of a negative Wassermann, and the symptoms disappeared; the block disappearing entirely after six months of treatment.

As Lutembacher says, "For a long time, precious time was lost and the patient exposed to the danger of a sudden death. The study of ventricular rhythms . . . is not a vain, theoretical speculation; it leads to practical deductions of the greatest interest."

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GROUND BONE AS FOOD AND MEDICINE

During the past twenty-five years it has been my good fortune to observe the effects of the administration of fresh and dried bone, mechanically reduced to a suitable size for administration to humans, both as a food and a medicine. Experiments on dogs and cats demonstrate the necessity of bone as a part of the diet of all flesh-eating animals, to maintain a normal condition of health; and as man, especially the Anglo-Saxon and we modern polyracial Americans, are liberal consumers of the flesh of animals, birds, fish and other animal foods, the necessity for a certain amount of calcium (bone) to help balance our diets and maintain a normal calcium balance, is obvious. We find a large proportion of children, and not a few adults, suffering from a calcium deficiency, although seemingly fed on a well-balanced diet of protein, carbohydrate, hydrocarbon, water, etc., in proper proportions. All carnivorous animals, as above stated, require raw bone in their diets. Even the baby walrus in the San Diego Zoo had to be fed on a diet of shellfish, principally clams with the shells crushed, to keep down excessive stomach acidity and prevent him from having pain and colic as soon as his milk-feeding days were over. How to feed bone to humans became a problem. We moderns cannot gnaw bones, as did our primitive and, later, semi-wild ancestors, and we might balk at using scraped deer horn, as the Chinese have done for several thousand years. With the Chinese this form of calcium is a great medicine. Cooked bone being worthless, newly scraped bone was used. Each day a piece of fresh, clean bone was rasped or scraped until about a teaspoonful was obtained. This was fed in mush, puddings, jelly or some protective covering, to insure ease in swallowing.

Today there are on the market several preparations of ground beef bone, which have been treated in vacuum pans, and is a very good substitute for the fresh bone. It does the work, is easy of administration, but is not quite as effective as the freshly prepared article.

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1 Lutembacher, R.: La Presse Médicale, Vol. 42, No. 5 (Jan. 17), 1934.